#### PATENT

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: DAVID J. CORISIS

APPLICATION No.: 10/620,714

FILED:

**JULY 15, 2003** 

For:

STACKED MICROELECTRONIC DIES AND METHODS FOR STACKING

**MICROELECTRONIC DIES** 

**EXAMINER:** 

ALEXANDER O.

**WILLIAMS** 

**ART UNIT:** 

2826

CONF. NO:

9586

### **Amendment in Response to Restriction Requirement**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated June 9, 2004, please amend the application as reflected in the following listing of claims.

Total Claims	34	-	34	=	0	X	18	0.00	
Independent Claims	6	1	6	=	0	×	86	0.00	
Multiple Depend	ent Claims (ch	eck	if app	licab	le)				
Other fee (pleas	e specify):								
TOTAL ADDIT	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:							0.00	
x Large Entity							Small Entity		
x No additiona	No additional fee is required for this amendment.								
	Please charge Deposit Account No in the amount of \$  A duplicate copy of this sheet is enclosed.								
A check in th	A check in the amount of \$ to cover the filing fee is enclosed.								
Payment by	Payment by credit card. Form PTO-2038 is attached.								
The Director is hereby authorized to charge and credit Deposit Account No. 50-0665 as described below.									
x Credit a	ny overpayme	nt.							
Charge any additional fling or application processing fees required under 37 CFR 1.16 and 1.17.									
1/1	- (N		<u></u> .			ſ	Dated:	June 29, 2004	
John/M. Wechk Attorney Reg. N									
PERKINS COIE P.O. Box 1247	ELLP								

Seattle, Washington 98111-1247

(206) 359-8000

PATENT	APPLICATION	SERIAL NO.	•
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# U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

### 07/21/2003 MMEKONEN 00000006 10620714

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PTO-1556 (5/87)

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1082935322181

CLAIMS AS FILED - PART I (Column 1) (Column 2)						-	SMALL ENTITY TYPE		OR	OTHER		
TOTAL CLAIMS			24					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			34 minus 20= *			y		X\$ 9=		OR	X\$18=	2.52
IND	EPENDENT CL	AIMS	6 minus 3 = *(			3		X42=		OR	X84=	252
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=	12-3 22	
* If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTAL		OR	TOTAL	1254	
CLAIMS AS AMENDED - PART II							015414		OR	OTHER	THAN	
		(Column 1)		(Column 2) (Column			١,	SMALL ENTITY			SMALL	
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAIM	=	1	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							ا د	+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)						
AMENDMENT B.		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S	Total	•	Minus	**		3	11	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	CNOCNY		-		X42≖		OR	X84=	
_	rino i Prizo	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		J	+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)		100H. TEE			ADDIT, FECT	
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDV	Total	*	Minus	**		=	] [	X\$ 9 <b>=</b>		OR	X\$18=	
AME	Independent	*	Minus	***	7	-	11	. X42=		OR	X84=	
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		ımn 1 is less than t					[	TOTAL		OR	TOTAL	
***	If the "Highest Nu	mber Previously P imber Previously P	aid For" IN THI	S SPACE	is less tha	n 3, enter "3."		ADDIT. FEE			ADDIT. FEE	L
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												